
State of Washington

Behavioral Risk Factor Surveillance System Questionnaire 1990

Washington State Department of Health
Center for Health Statistics
and
Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion
Office of Adult and Community Health
Behavioral Surveillance Branch

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Washington State Department of Health
Center for Health Statistics

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1. RECORD RESPONDENT'S SEX

| | |
|--------|---|
| Male | 1 |
| Female | 2 |

2. First, I'd like to begin by asking you about using seat belts. How often do you use seat belts when you drive or ride in a car; would you say . . . READ 1-5:

| | |
|-------------------------|---|
| Always | 1 |
| Nearly Always | 2 |
| Sometimes | 3 |
| Seldom | 4 |
| Or never | 5 |
| ----- | |
| Don't know/Not sure | 7 |
| Never drive/ride in car | 8 |
| Refused | 9 |

3. These next questions are about hypertension or high blood pressure. Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure? PROBE FOR DOCTOR, NURSE, OR OTHER HEALTH PROFESSIONAL.

| | | |
|---------------------|-----------------------------------|-------|
| SKIP TO Q.7 < ----- | No | 1 |
| | Yes, by doctor | 2 |
| | Yes, by nurse | 3 |
| | Yes, by other health professional | 4 |
| SKIP TO Q.7 < ----- | Don't know/Not sure | 5 (7) |
| | Refused | 6 (9) |

4. Have you been told on more than one occasion that your blood pressure was high, or have you been told this only once?

| | |
|---------------------|-------|
| More than once | 1 |
| Only once | 2 |
| Don't know/Not sure | 3 (7) |
| Refused | 4 (9) |

5. Is any medicine currently prescribed for your high blood pressure?

| | | |
|---------------------|---------------------|-------|
| | Yes | 1 |
| | No | 2 |
| SKIP TO Q.7 < ----- | Don't know/Not sure | 3 (7) |
| | Refused | 4 (9) |

6. Are you currently taking medicine for your high blood pressure?

PROBE FOR "ALL OR MOST OF THE TIME" OR "ONLY OCCASIONALLY," IF NECESSARY.
IF ANSWER IS "Yes," USE "YES, ALL OR MOST OF THE TIME."

| | |
|------------------------------|-------|
| Yes, all or most of the time | 1 |
| Yes, occasionally | 2 |
| No | 3 |
| Don't know/Not sure | 4 (7) |
| Refused | 5 (9) |

7. The next few questions are about exercise, recreation, or physical activities other than your regular job duties.

During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

| | | | |
|----------------------------|---------------------|---|-----|
| CONTINUE WITH Q. 8 < ----- | Yes | 1 | |
| | No | 2 | |
| SKIP TO Q. 17 < ----- | Don't know/Not sure | 3 | (7) |
| | Refused | 4 | (9) |

8. What type of physical activity or exercise did you spend the most time doing during the past month?

| | | |
|------------------------------------|---|------|
| Aerobics | 1 | (01) |
| Baseball/Softball | 2 | (41) |
| Bicycle Machine | 3 | (55) |
| Dancing | 4 | (12) |
| Gardening, Wood Chopping, Yardwork | 5 | (14) |
| Hiking | 6 | (18) |
| Hunting | 7 | (21) |
| Jogging | 8 | (22) |
| Rowing Machine | 9 | (56) |
| Running | A | (30) |
| Skiing, snow | B | (39) |
| Skiing, water | C | (52) |
| Swimming | D | (46) |
| Walking | E | (51) |
| Other (SPECIFY:) | | |

| | | |
|-----------------------|---------|--------|
| | | F |
| SKIP TO Q. 12 < ----- | Refused | G (99) |

IF ANSWER TO Q. 8 IS RUNNING, JOGGING, WALKING, OR SWIMMING, ASK Q. 9. ALL OTHERS, SKIP TO Q. 10.

9. How far did you usually (walk)/(run)/(jog)/(swim)? SHOW IN MILES AND TENTHS.
(EXAMPLE - 1 AND A QUARTER MILE = 015 [sic]) IF UNSURE, RECORD AS GIVEN BY RESPONDENT.

| | |
|---------------------|---------|
| Miles and tenths | — — . — |
| Don't know/Not sure | 777 |
| Refused | 999 |

10. How many times per week or per month did you take part in this activity? (EXAMPLE: 2 TIMES PER WEEK = 2W, 4 TIMES A MONTH = 4M)

| | |
|---------------------|-----|
| Don't know/Not sure | 777 |
| Refused | 999 |

11. And when you took part in this activity, for how many minutes or hours did you usually keep at it?
RECORD AND IN HOURS AND MINUTES. (EXAMPLE: 1 HOUR AND 20 MINUTES - 120, 20
MINUTES - 020, 6 AND A HALF HOURS - 630).

| | |
|---------------------|-----------------------|
| | _____ hrs. _____ min. |
| Don't know/Not sure | 777 |
| Refused | 999 |

12. Was there another physical activity or exercise that you participated in during the last month?

| | | | |
|-----------------------|---------------------|---|-----|
| ASK Q. 13 < ----- | Yes | 1 | |
| | No | 2 | |
| SKIP TO Q. 17 < ----- | Don't know/Not sure | 3 | (7) |
| | Refused | 4 | (9) |

13. What other type of physical activity gave you the next most exercise during the past month?

| | | |
|------------------------------------|---|------|
| Aerobics | 1 | (01) |
| Baseball/Softball | 2 | (41) |
| Bicycle Machine | 3 | (55) |
| Dancing | 4 | (12) |
| Gardening, Wood Chopping, Yardwork | 5 | (14) |
| Hiking | 6 | (18) |
| Hunting | 7 | (21) |
| Jogging | 8 | (22) |
| Rowing Machine | 9 | (56) |
| Running | A | (30) |
| Skiing, snow | B | (39) |
| Skiing, water | C | (52) |
| Swimming | D | (46) |
| Walking | E | (51) |
| Other (SPECIFY:) | | |

| | |
|-----------------------|----------------|
| | _____ F |
| SKIP TO Q. 17 < ----- | Refused G (99) |

IF ANSWER TO Q.13 IS RUNNING, JOGGING, WALKING, OR SWIMMING, ASK Q. 8. ALL
OTHERS, SKIP TO Q. 15.

14. How far did you usually (walk)/(run)/(jog)/(swim)? SHOW IN MILES AND TENTHS.
(EXAMPLE - 1 AND A QUARTER MILE = 015 [sic]) IF UNSURE, RECORD AS GIVEN BY
RESPONDENT.

| | |
|---------------------|---------------|
| Miles and tenths | _____ . _____ |
| Don't know/Not sure | 777 |
| Refused | 999 |

15. How many times per week or per month did you take part in this activity? (EXAMPLE: 2 TIMES
PER WEEK = 2W, 4 TIMES A MONTH = 4M)

| | |
|---------------------|-----------|
| Don't know/Not sure | _____ 777 |
| Refused | 999 |

16. And when you took part in this activity, for how many minutes or hours did you usually keep at it? RECORD AND IN HOURS AND MINUTES. (EXAMPLE: 1 HOUR AND 20 MINUTES - 20 MINUTES - 020, 6 AND A HALF HOURS - 630).

| | | |
|---------------------|------|------|
| | hrs. | min. |
| Don't know/Not sure | 777 | |
| Refused | 999 | |

17. Now I would like to ask you a few questions about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life?

NOTE: 100 CIGARETTES = 5 PACKS.

| | | |
|-----------------------|---------------------|-------|
| | Yes | 1 |
| | No | 2 |
| SKIP TO Q. 24 < ----- | Don't know/Not sure | 3 (7) |
| | Refused | 4 (9) |

18. Do you smoke cigarettes now?

| | | |
|-----------------------|---------|-------|
| ASK Q. 19 < ----- | Yes | 1 |
| SKIP TO Q. 24 < ----- | No | 2 |
| | Refused | 3 (9) |

19. On the average, about how many cigarettes a day do you now smoke? RECORD # OF CIGARETTES BELOW.

NOTE: 1 PACK = 20 CIGARETTES.

| | |
|-----------------------|--------------------------|
| | (# OF CIGARETTES:) ----- |
| Don't smoke regularly | 88 |
| Refused | 99 |

20. Have you ever made a serious attempt to stop smoking cigarettes?

| | | |
|-----------------------|---------|-------|
| ASK Q. 21 < ----- | Yes | 1 |
| SKIP TO Q. 24 < ----- | No | 2 |
| | Refused | 3 (9) |

21. When was the start of your most recent quit attempt? DO NOT READ.

| | |
|----------------------|-------|
| Past week | 1 |
| Past 2 weeks | 2 |
| Past month | 3 |
| Past 6 months | 4 |
| Past year | 5 |
| More than 1 year ago | 6 |
| Don't know/Not sure | 7 |
| Refused | 8 (9) |

22. How long did you actually stay off cigarettes that time? DO NOT READ.

| | | | |
|-----------------------|----------------------------------|---|-----|
| SKIP TO Q. 24 < ----- | Less than one day | 1 | |
| | One to six days | 2 | |
| | Seven days to less than 3 months | 3 | |
| | Three months to less than 6 mos. | 4 | |
| | Six months to less than 1 yr. | 5 | |
| | One or more years | 6 | |
| | Don't know/Not sure | 7 | |
| | Refused | 8 | (9) |

23. About how long has it been since you last smoked cigarettes regularly? DO NOT READ.

| | | |
|----------------------------------|---|-----|
| Less than 1 month | 1 | |
| One month to less than 3 months | 2 | |
| Three months to less than 6 mos. | 3 | |
| Six months to less than 1 yr. | 4 | |
| One or more years | 5 | |
| Don't know/Not sure | 6 | (7) |
| Refused | 7 | (9) |

24. These next few questions are about the use of beer, wine, wine coolers, cocktails, and liquor, such as vodka, gin, rum, or whiskey - - all kinds of alcoholic beverages that people drink at meals, special occasions, or when just relaxing.

Have you had any beer, wine, wine coolers, cocktails, or liquor during the past month, that is, since _____?
DATE

| | | | |
|-----------------------|---------|---|-----|
| SKIP TO Q. 29 < ----- | Yes | 1 | |
| | No | 2 | |
| | Refused | 3 | (9) |

25. During the past month, how many days per week or per month did you drink any alcoholic beverage, on the average? RECORD BELOW. (EXAMPLE: 2 TIMES A WEEK - 2W, 2 TIMES A MONTH - 2M)

| | | |
|-----------------------|---------------------|-----|
| SKIP TO Q. 27 < ----- | Don't know/Not sure | 777 |
| | Refused | 999 |

26. A drink is one can or bottle of beer, one glass of wine, one can or bottle of wine cooler, one cocktail, or one shot of liquor. On the days when you drank, about how many drinks did you drink, on the average? RECORD BELOW.

| | |
|---------------------|--------------|
| | _____ drinks |
| Don't know/Not sure | 77 |
| Refused | 99 |

27. Considering all types of alcoholic beverages, that is, beer, wine, wine coolers, cocktails, and liquor, as drinks, how many times during the past month did you have five or more drinks on an occasion?
RECORD BELOW.

| | |
|---------------------|-------------|
| | _____ times |
| None | 88 |
| Don't know/Not sure | 77 |
| Refused | 99 |

28. And during the past month, how many times have you driven when you've had perhaps too much to drink? RECORD BELOW.

| | |
|---------------------|-------------|
| | _____ times |
| None | 88 |
| Don't know/Not sure | 77 |
| Refused | 99 |

29. Some people visit a doctor for a routine checkup, even though they are feeling well and have not been sick. How long has it been since you last visited a doctor for a routine checkup; was it . . . READ 1-4:

| | | |
|-----------------------|--------------------------|-------|
| | Within the past year | 1 |
| | Within the past 2 years | 2 |
| | Within the past 5 years | 3 |
| | Or more than 5 years ago | 4 |
| ----- | | |
| SKIP TO Q. 30 < ----- | Don't know/Not sure | 5 (7) |
| | Never | 6 (8) |
| | Refused | 7 (9) |

30. What type of doctor did you see for your last routine check-up? Was it a . . . IF MALE RESPONDENT, READ 1-4; IF FEMALE RESPONDENT, READ 1-5:

| | | |
|-------|---|-------|
| | Family or General Practitioner | 1 |
| | Internist | 2 |
| | Specialist such as heart, lung, or stomach specialist | 3 |
| | Other | 4 |
| ----- | | |
| * | Obstetrician/Gynecologist | 5 |
| ----- | | |
| | Don't know/Not sure | 6 (7) |
| | Refused | 7 (9) |

31. These next questions are about blood cholesterol, which is a fatty substance found in the blood.

Have you ever had your blood cholesterol checked?

| | | |
|-----------------------|---------------------|-------|
| ASK Q. 32. < ----- | Yes | 1 |
| | No | 2 |
| | Don't know/Not sure | 3 (7) |
| SKIP TO Q. 40 < ----- | Refused | 4 (9) |

32. About how long has it been since you last had your blood cholesterol check; would you say it was . . .
READ 1-4:

| | | |
|--------------------------|---|-----|
| Within the past year | 1 | |
| Within the past 2 years | 2 | |
| Within the past 5 years | 3 | |
| Or more than 5 years ago | 4 | |
| ----- | | |
| Don't know/Not sure | 5 | (7) |
| Refused | 6 | (9) |

33. Have you ever been told your blood cholesterol level, in numbers?

| | | | |
|-----------------------|---------------------|---|-----|
| ASK TO Q. 34 < ----- | Yes | 1 | |
| | No | 2 | |
| SKIP TO Q. 35 < ----- | Don't know/Not sure | 3 | (7) |
| | Refused | 4 | (9) |

34. What is your blood cholesterol level? RECORD NUMBER BELOW.

| | |
|---------------------|-----------|
| Don't know/Not sure | — — — 777 |
| Refused | 999 |

35. Have you ever been told by a doctor or other health professional that your blood cholesterol is high?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

36. Are you now under the advice of a doctor to reduce your blood-cholesterol or blood-fat level?

| | | | |
|-----------------------|---------------------|---|-----|
| ASK TO Q. 37 < ----- | Yes | 1 | |
| | No | 2 | |
| SKIP TO Q. 40 < ----- | Don't know/Not sure | 3 | (7) |
| | Refused | 4 | (9) |

Did the doctor . . . READ a - c:

37. Prescribe a medication to lower your blood cholesterol?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

38. Provide you a low-fat or low-cholesterol diet?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

39. Refer you to a dietitian, nutritionist, or nurse to help you reduce the fat or cholesterol in your diet?

| | |
|---------------------|-------|
| Yes | 1 |
| No | 2 |
| Don't know/Not sure | 3 (7) |
| Refused | 4 (9) |

40. Next, a question about diabetes, sometimes called sugar diabetes. Have you ever been told by a doctor that you have diabetes?

| | |
|---------------------|-------|
| Yes | 1 |
| No | 2 |
| Don't know/Not sure | 3 (7) |
| Refused | 4 (9) |

NOTE: MALES - SKIP TO Q. 50; FEMALES ONLY - ASK Q. 41-49.

41. These next questions are about mammograms, which are x-ray tests of the breast to look for cancer.

Have you ever had a mammogram?

| | | |
|-----------------------|---------------------|-------|
| | Yes | 1 |
| SKIP TO Q. 44 < ----- | No | 2 |
| | Don't know/Not sure | 3 (7) |
| SKIP TO Q. 47 < ----- | Refused | 4 (9) |

42. About how long has it been since you had your last mammogram; was it . . . READ 1-4:

| | | |
|-----------------------|--------------------------|-------|
| SKIP TO Q. 45 < ----- | Within the past year | 1 |
| | Within the past 2 years | 2 |
| | Within the past 5 years | 3 |
| ASK Q. 43 < ----- | Or more than 5 years ago | 4 |
| | ----- | |
| | Don't know/Not sure | 5 (7) |
| | Refused | 6 (9) |

43. What is the most important reason that you did not have a mammogram in the last year? DO NOT READ. RECORD BELOW.

44. What is the most important reason that you never had a mammogram? DO NOT READ. RECORD BELOW.

| | Q. 43 | Q. 44 |
|---|---------------|---------------|
| Not recommended by doctor/Doctor never said it was needed | 1 | 1 |
| Not needed/Not necessary | 2 | 2 |
| Never heard of a mammogram | 3 | 3 |
| Cost | 4 | 4 |
| No insurance to pay for it | 5 | 5 |
| Other | 6 | 6 |
| Don't know/Not sure | 7 | 7 |
| Refused | 8 (9) | 8 (9) |
| | SKIP TO Q. 45 | SKIP TO Q. 47 |

45. Was your last mammogram done as part of a routine checkup, because of a breast problem, or because you've already had breast cancer?

| | |
|---------------------|-------|
| Routine checkup | 1 |
| Breast problem | 2 |
| Had breast cancer | 3 |
| Don't know/Not sure | 4 (7) |
| Refused | 5 (9) |

46. Whose idea was it for you to have this last mammogram; was it your idea, your doctor's idea, or someone else's idea? PROBE FOR "MOST INFLUENTIAL." ONE ONLY.

| | |
|---------------------|-------|
| Respondent's idea | 1 |
| Doctor's idea | 2 |
| Someone else's idea | 3 |
| Don't know/Not sure | 4 (7) |
| Refused | 5 (9) |

47. These next questions are about breast physical examination, which is when the breast is felt for lumps by a doctor or medical assistant.

Have you ever had a breast physical exam by a doctor or a medical assistant?

| | | |
|-----------------------|---------------------|-------|
| ASK Q. 48/49 < ----- | Yes | 1 |
| | No | 2 |
| SKIP TO Q. 50 < ----- | Don't know/Not sure | 3 (7) |
| | Refused | 4 (9) |

48. About how long has it been since your last breast physical exam? Was it . . . READ 1-4:

| | |
|---|-------|
| Within the past year (0 - 12 mos. ago) | 1 |
| Within the past two years (13 - 24 mos. ago) | 2 |
| Within the past five years (25 - 60 mos. ago) | 3 |
| More than five years (61 + mos. ago) | 4 |
| ----- | |
| Don't know/Not sure | 5 (7) |
| Refused | 6 (9) |

49. Was your last breast physical exam done as part of a routine checkup, because of a breast problem, or because you've already had breast cancer?

| | |
|---------------------|-------|
| Routine checkup | 1 |
| Breast problem | 2 |
| Had breast cancer | 3 |
| Don't know/Not sure | 4 (7) |
| Refused | 5 (9) |

MALES & FEMALES:

50. These next few questions are to determine your beliefs and opinions about the national health problem of AIDS.

Have you ever heard the AIDS virus called HIV?

| | |
|---------------------|-------|
| Yes | 1 |
| No | 2 |
| Don't know/Not sure | 3 (7) |
| Refused | 4 (9) |

51. To your knowledge, are there drugs available which can lengthen the life of a person infected with the AIDS virus?

| | |
|---------------------|-------|
| Yes | 1 |
| No | 2 |
| Don't know/Not sure | 3 (7) |
| Refused | 4 (9) |

52. Do you think a person who is infected with the AIDS virus can look and feel well and healthy?

| | |
|---------------------|-------|
| Yes | 1 |
| No | 2 |
| Don't know/Not sure | 3 (7) |
| Refused | 4 (9) |

There has been a lot of talk about how you can and cannot get infected with the AIDS virus. Do you think you can get infected from . . . READ a - b:

| | <u>Yes</u> | <u>No</u> | <u>Don't Know</u> <u>Not Sure</u> | <u>Refused</u> |
|---------------------------------|------------|-----------|--------------------------------------|----------------|
| 53. Giving blood | 1 | 2 | 3 (7) | 4 (9) |
| 54. Mosquitoes or other insects | 1 | 2 | 3 (7) | 4 (9) |

55. Do you have a child or children in kindergarten through the eighth grade?

| | | | |
|-----------------------|---------------------|---|-----|
| ASK Q. 56 < ----- | Yes | 1 | |
| | No | 2 | |
| SKIP TO Q. 58 < ----- | Don't know/Not sure | 3 | (7) |
| | Refused | 4 | (9) |

56. Would you allow your child(ren) to be in the same classroom with a child who is infected with the AIDS virus?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

57. At what grade do you think your child should begin AIDS education in school? RECORD GRADE LEVEL: (EXAMPLE: 8TH GRADE = 08, SENIOR IN HIGH SCHOOL = 12)

| | |
|--------------------------------|----|
| Prior to 1 st grade | 66 |
| Never | 88 |
| Don't know/Not sure | 77 |
| Refused | 99 |

58. Would you eat in a restaurant where the cook is infected with the AIDS virus?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

59. Would you be willing to work with a person who is infected with the AIDS virus?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

60. Where could you go to be tested for the AIDS virus infection? DO NOT READ.

| | |
|------------------------------------|--------|
| Private doctor, HMO | 1 (01) |
| Blood bank/Plasma center/Red cross | 2 (02) |
| Health department | 3 (03) |
| AIDS clinic/AIDS testing site | 4 (04) |
| Hospital, emergency room | 5 (05) |

| | |
|--|--------|
| Family-planning clinic | 6 (06) |
| STD clinic (Sexually Transmitted Disease) | 7 (07) |
| Community health clinic/ Primary-care clinic | 8 (08) |
| Company or industry clinic | 9 (09) |
| Military induction or examination | A (10) |

Other (SPECIFY):

| | |
|---------------------|--------|
| _____ | B (87) |
| No place | C (88) |
| Don't know/Not sure | D (77) |
| Refused | E (99) |

SKIP TO Q.62 ←-----

61. Where else could you go? DO NOT READ.

| | |
|------------------------------------|--------|
| Private doctor, HMO | 1 (01) |
| Blood bank/Plasma center/Red cross | 2 (02) |
| Health department | 3 (03) |
| AIDS clinic/AIDS testing site | 4 (04) |
| Hospital, emergency room | 5 (05) |

| | |
|--|--------|
| Family-planning clinic | 6 (06) |
| STD clinic (Sexually Transmitted Disease) | 7 (07) |
| Community health clinic/ Primary-care clinic | 8 (08) |
| Company or industry clinic | 9 (09) |
| Military induction or examination | A (10) |

Other (SPECIFY):

| | |
|---------------------|--------|
| _____ | B (87) |
| No place | C (88) |
| Don't know/Not sure | D (77) |
| Refused | E (99) |

62. Some people use condoms to keep from getting the AIDS virus through sexual activity. How effective do you think using a condom is in preventing getting the AIDS virus through sexual activity?
READ 1-3:

| | |
|--------------------------|-------|
| Very effective | 1 |
| Somewhat effective | 2 |
| Or not at all effective | 3 |
| ----- | |
| Don't know how effective | 4 |
| Don't know method | 5 |
| Refused | 6 (9) |

63. Have you heard of Radon -- which is a radioactive gas that occurs in nature?

| | | | |
|-----------------------|---------------------|---|-----|
| ASK Q. 64 < ----- | Yes | 1 | |
| | No | 2 | |
| SKIP TO Q. 74 < ----- | Don't know/Not sure | 3 | (7) |
| | Refused | 4 | (9) |

64. Has your household air been tested for the presence of Radon gas?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

65. Do you know how to test your home for the presence of Radon gas?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

66. Do you, or does anyone in your home plan to have your household air tested for Radon within the next year?

| | | |
|---------------------|---|-----|
| Yes | 1 | |
| No | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

67. Please indicate your agreement or disagreement with the following statement: "Prolonged exposure to Radon gas can be harmful to your health." Do you agree or disagree?

| | | |
|---------------------|---|-----|
| Agree | 1 | |
| Disagree | 2 | |
| Don't know/Not sure | 3 | (7) |
| Refused | 4 | (9) |

Which, if any, of the following conditions do you think can be caused by prolonged Radon exposure?
READ a - e:

| | <u>Yes</u> | <u>No</u> | <u>Don't know/</u> <u>Not sure</u> | <u>Refused</u> |
|--------------------------------|------------|-----------|---------------------------------------|----------------|
| 68. Headache | 1 | 2 | 3 (7) | 4 (9) |
| 69. Asthma | 1 | 2 | 3 (7) | 4 (9) |
| 70. Arthritis | 1 | 2 | 3 (7) | 4 (9) |
| 71. Lung cancer | 1 | 2 | 3 (7) | 4 (9) |
| 72. Other cancers besides lung | 1 | 2 | 3 (7) | 4 (9) |

73. Which of the following best describes your residence? READ 1-5:

- | | | |
|---|---|-----|
| Single-family home, duplex, or townhouse | 1 | |
| Apartment or condominium at basement level or on the first or second floor | 2 | |
| Apartment or condo above the second floor | 3 | |
| Trailer or motor home | 4 | |
| Or other (SPECIFY): _____ | 5 | |
| Don't know /Not sure | 6 | (7) |
| Refused | 7 | (9) |

74. During the past month, did you participate in any water-related activities such as swimming, wading, spas, boating, or fishing?

- | | | | |
|------------------------|---------------------|---|-----|
| ASK Q.75 < ----- | Yes | 1 | |
| | No | 2 | |
| SKIP TO Q. 86. < ----- | Don't know/Not sure | 3 | (7) |
| | Refused | 4 | (9) |

75. On the average, how often in the past month did you participate in these activities? RECORD BELOW (EXAMPLE 2 TIMES = 2W, 4 TIMES A MONTH = 4M)

| | |
|---------------------|-----|
| Don't know/Not sure | 777 |
| Refused | 999 |

The following are locations where water activities can occur. Which of them have you used in the past month? READ a - h:

- | | <u>Yes</u> | <u>No</u> | <u>Don't know/
Not sure</u> | <u>Refused</u> |
|--|------------|-----------|---------------------------------|----------------|
| 76. Public or commercial swimming pool | 1 | 2 | 3 (7) | 4 (9) |
| 77. Family swimming pool | 1 | 2 | 3 (7) | 4 (9) |
| 78. River or stream | 1 | 2 | 3 (7) | 4 (9) |
| 79. Lake or pond | 1 | 2 | 3 (7) | 4 (9) |
| 80. Irrigation ditch | 1 | 2 | 3 (7) | 4 (9) |
| 81. Public beach with marked swimming area | 1 | 2 | 3 (7) | 4 (9) |
| 82. Ocean or Puget Sound | 1 | 2 | 3 (7) | 4 (9) |
| 83. Other beaches | 1 | 2 | 3 (7) | 4 (9) |

84. (DO NOT ASK IF YES IN Q. 55) Do you have children under eighteen living in the household?

- | | | | |
|------------------------|---------------------|---|-----|
| ASK Q.85 < ----- | Yes | 1 | |
| | No | 2 | |
| SKIP TO Q. 86. < ----- | Don't know/Not sure | 3 | (7) |
| | Refused | 4 | (9) |

85. In the past month, how often (has)/(have) the child(ren) participated in any water activities such as swimming, wading, or fishing? RECORD BELOW. (EXAMPLE 2 TIMES = 2W, 4 TIMES A MONTH = 4M)

| | | |
|---------------------|-------|-----|
| Don't know/Not sure | _____ | 777 |
| Refused | | 999 |

DEMOGRAPHICS

86. These next few questions ask for a little more information about yourself.

How old were you on your last birthday? RECORD AGE IN YEARS.

| | | | |
|---------------------|-------|-------|-------|
| | _____ | _____ | years |
| Don't know/Not sure | | | 07 |
| Refused | | | 09 |

87. What is your race; would you say . . . READ 1-4:

| | | |
|-----------------------------------|-------|-------|
| White | | 1 |
| Black | | 2 |
| Asian, Pacific Islander | | 3 |
| Aleutian, Eskimo, Native American | | 4 |
| ----- | | |
| Some other (SPECIFY): | | |
| | _____ | 5 |
| Don't know/Not sure | | 6 (7) |
| Refused | | 7 (9) |

88. Are you of Hispanic origin, such as Mexican American, Latin American, Puerto Rican, or Cuban?

| | | |
|---------------------|--|-------|
| Yes | | 1 |
| No | | 2 |
| Don't know/Not sure | | 3 (7) |
| Refused | | 4 (9) |

89. What is the highest grade or year of school you completed? READ ONLY IF NECESSARY.

| | | |
|---|---|---|
| 8 th grade or less | | 1 |
| Some high school | 2 | |
| High-school graduate or GED certificate | | 3 |
| Some technical school | | 4 |
| Technical-school graduate | | 5 |
| ----- | | |
| Some college | | 6 |
| College graduate | | 7 |
| Post-graduate or professional degree | | 8 |
| Refused | | 9 |

90. Are you currently . . . READ 1-7:

| | |
|------------------------------------|-------|
| Employed for wages | 1 |
| Self- employed | 2 |
| Out of work for more than 1 year | 3 |
| Out of work for less than a 1 year | 4 |
| A homemaker | 5 |
| A student | 6 |
| Or Retired | 7 |
| ----- | |
| Refused | 8 (9) |

91. And are you . . . READ 1-6:

| | |
|------------------------------------|-------|
| Married | 1 |
| Divorced | 2 |
| Widowed | 3 |
| Separated | 4 |
| Never married | 5 |
| Or a member of an unmarried couple | 6 |
| ----- | |
| Refused | 7 (9) |

92. Which of the following categories best describe your annual household income from all sources . . .
READ 1-8:

| | |
|---------------------|-------|
| Less than \$10,000 | 1 |
| \$10 - \$15,000 | 2 |
| \$15 - \$20,00 | 3 |
| \$20 - \$25,000 | 4 |
| \$25 - \$35,00 | 5 |
| \$35 - \$50,000 | 6 |
| Or over \$50,000 | 7 (8) |
| ----- | |
| Don't know/Not sure | 8 (7) |
| Refused | 9 (9) |

93. About how much do you weigh without shoes? RECORD BELOW. (EXAMPLE: 120 POUNDS = 120, 98 POUNDS = 098)

| | |
|---------------------|-------------|
| | ____ pounds |
| Don't know/Not Sure | 777 |
| Refused | 999 |

94. About how tall are you without shoes? RECORD BELOW. (Example: 5'2" = 502, 5'11" = 511)

| | |
|---------------------|---------------------|
| | ____ ft ____ inches |
| Don't know/Not Sure | 777 |
| Refused | 999 |

ASK THIS QUESTION ONLY OF FEMALES BETWEEN 18 AND 45 YEARS OF AGE
ALL OTHERS, SKIP TO Q. 97.

95. To your knowledge, are you now pregnant ?

| | | |
|---------------------|---------------------|-------|
| ASK Q. 96 ←----- | Yes | 1 |
| | No | 2 |
| SKIP TO Q. 97←----- | Don't know/Not sure | 3 (7) |
| | Refused | 4 (9) |

96. During what month is your baby due?

| | |
|---------------------|--------|
| January | 1 (01) |
| February | 2 (02) |
| March | 3 (03) |
| April | 4 (04) |
| May | 5 (05) |
| June | 6 (06) |
| July | 7 (07) |
| August | 8 (08) |
| September | 9 (09) |
| October | A (10) |
| November | B (11) |
| December | C (12) |
| Don't know/Not sure | D (77) |
| Refused | E (99) |

97. Are there children under the age of eighteen living in your household?

| | | |
|------------------------|---------------------|---|
| ASK Q. 98/99 < ----- | Yes | 1 |
| | No | 2 |
| SKIP TO Q. 101 < ----- | Don't know/ Refused | 3 |

98. How many are infants to age five? RECORD. (0 = NONE, 8 = EIGHT OR MORE, 9 = REFUSED)

| | | |
|---------|-------|---|
| Refused | _____ | 9 |
|---------|-------|---|

99. How many age six to twelve? RECORD. (0 = NONE, 8 = EIGHT OR MORE, 9 = REFUSED)

| | | |
|---------|-------|---|
| Refused | _____ | 9 |
|---------|-------|---|

100. How many age thirteen to seventeen? RECORD. (0 = NONE, 8 = EIGHT OR MORE, 9 = REFUSED)

| | | |
|---------|-------|---|
| Refused | _____ | 9 |
|---------|-------|---|

101. How many telephone numbers will reach this household, including the number I used today?
RECORD BELOW.

NOTE: DIFFERENTIATE BETWEEN TELEPHONE NUMBERS AND TELEPHONE SETS, IF NECESSARY. INCLUDE ALL TELPHONE NUMBERS THAT CAN REACH HOUSEHOLD.

Total Telephone Numbers: _____

102. That's my last question. Let me emphasize that your answers cannot be identified with your name. Everyone's answers will be combined to give us information about the health practices of people in this state.

Thank you very much for your time and cooperation.

103. RECORD COUNTY FROM CARD:

| | | | | | |
|----------|-----|--------------|-----|-------------|-----|
| Adams | 001 | Grays Harbor | 014 | Pierce | 027 |
| Asotin | 002 | Island | 015 | San Juan | 028 |
| Benton | 003 | Jefferson | 16 | Skagit | 029 |
| Chelan | 004 | King | 017 | Skamania | 030 |
| Clallam | 005 | Kitsap | 018 | Snohomish | 031 |
| Clark | 006 | Kittitas | 019 | Spokane | 032 |
| Columbia | 007 | Klickitat | 020 | Stevens | 033 |
| Cowlitz | 008 | Lewis | 021 | Thurston | 034 |
| Douglas | 009 | Lincoln | 022 | Wahkiakum | 035 |
| Ferry | 010 | Mason | 023 | Walla Walla | 036 |
| Franklin | 011 | Okanogan | 024 | Whatcom | 037 |
| Garfield | 012 | Pacific | 025 | Whitman | 038 |
| Grant | 013 | Pend Oreille | 026 | Yakima | 039 |

104. (FIPS code set in)

105. (Stratum code set in)

107. AREA CODE

110. TOTAL HOUSEHOLD MEMBERS

111. TOTAL NUMBER OF MEN

112. TOTAL NUMBER OF WOMEN

113. ID NUMBER

114. DAY OF WEEK

117. RESPONDENT #

118. TIME OF DAY

119. ATTEMPT

120. DATE

122. Is this a wind down?

Yes
No

1
2

123. (Record Number set in)

125. (disposition code set in)